

School of Engineering & Applied Sciences

Notification of Engagement in External Activity/Consulting

School of Engineering employees may use this form as notification of engagement in professional and outside activities and outside consulting. The notification should be completed before engaging in any outside activity/consulting.

Name:

Title:

Department:

E-mail

Classification:

Faculty

Researcher

Staff

Student Employee

Employment Status:

Full-Time

If Part-Time Indicate Percent:

Part-Time

Appointment Basis:

Calendar Year

Academic Year

Summer

Funding:

What percentage of your position is currently funded from sponsored research?

External Entity Name &
Address:

Please answer the following questions concerning this external entity:

1. Is this entity engaged in current or prospective sponsored projects with UB?

Yes

No

If yes, are you an investigator for any of these projects?

Yes

No

2. Do you or a family member have an ownership interest in this entity?

Yes

No

3. To your knowledge, does any other UB employee have an ownership interest in this entity?

Yes

No

If yes, provide employee-owner's name

Begin date for activity:

End date for activity

(Notification of the activity expires at the end of the fiscal year - June 30. A renewal notification must be filed for activities that continue beyond the end of the current fiscal year.)

Total Number of Days devoted to this activity:

1. Does this activity exceed more than 4 days in any 4 week period?

Yes

No

2. Will this external activity affect your ability to meet your instruction or other university responsibilities?

Yes

No

If Yes, please explain:

How many days were previously approved (or pending) for consulting or other external activity during the CURRENT fiscal year, excluding this request?

Total Number of Days:

Describe in detail the activity
and/or nature of relationship
with the external entity:

VALUE OF FINANCIAL INTERESTS RELATED TO EXTERNAL ENTITY DURING THE PAST FISCAL YEAR: Indicate the value of income and/or ownership interest in the external entity aggregated for you and members of your immediate family for the **PRIOR FISCAL YEAR (July 1 - June 30):**

\$0-4,999	\$5,000-9,999	\$10,000-19,999
\$20,000-100,000	>\$100,000	Undetermined

Indicate the basis for the
income/payments from the
external entity to you and your
immediate family members:

Indicate the nature of the
ownership interest in the
external entity aggregated for
you and immediate family
members: (include % of
ownership)

VALUE OF FINANCIAL INTERESTS RELATED TO EXTERNAL ENTITY DURING THE CURRENT FISCAL YEAR: Indicate the actual or anticipated value of income and/or ownership interest in the external entity aggregated for you and members of your immediate family for the **CURRENT FISCAL YEAR (July 1 - June 30):**

\$0-4,999	\$5,000-9,999	\$10,000-19,999
\$20,000-100,000	>\$100,000	Undetermined

Indicate the basis for the
income/payments from external
entity to you and your
immediate family members:

Indicate the nature of the
ownership interest in the
external entity aggregated for
you and immediate family
members

Answer the following questions to the best of your knowledge. Use the blank space on the following page or attach a separate sheet to explain any YES answer to the questions below:

1. Will you serve as an expert witness in any litigation?	Yes	No
2. Do you intend to perform research for this external entity at the University?	Yes	No
3. Do you or any member of your family hold a position of management in the external entity?	Yes	No
4. Will other faculty members, students, or other research personnel be involved in this external activity?	Yes	No
5. Will this external activity require the use of University equipment or facilities?	Yes	No
6. Does this activity include the signing of an agreement with STOR regarding rights in inventions and materials?	Yes	No
7. Are you required to assign any intellectual property rights to the entity?	Yes	No

Explanations:

I understand that consulting/external employment may not be undertaken on any portion of time covered by federal grants or contracts.

I further certify that there will be no conflict of interest between this outside employment and my responsibilities as an employee of the State University of New York at Buffalo.

The proposed employment will not interfere with my assigned duties. I feel that my value as a University employee and my own professional status will be enhanced and improved by the proposed outside professional activity. I also certify that this employment/consulting work will be conducted at no expense to the SUNY system. In such outside, employment, I shall act as an individual and not as a representative of the SUNY system.

Employee Signature:

Date:

Department Head/Supervisor:

Dean: